

# **CONNECTICUT HIGHWAY SAFETY PROGRAM**

## **PROJECT APPLICATION INSTRUCTIONS**

### **FOR**

### **FY 2010 Comprehensive DUI Enforcement Program**

Complete all of the following sections of the attached FY 2010 Comprehensive DUI Enforcement Program application and return it to the Connecticut Department of Transportation's, Transportation Safety Section at the following address:

**Joseph T. Cristalli, Jr**  
**Department of Transportation**  
**Transportation Safety Section**  
**P. O. Box 317546**  
**2800 Berlin Turnpike**  
**Newington, CT 06131-7546**

**RETURN DATE: 2 - 3 weeks prior to first scheduled day of enforcement**

### **COMPLETE ONLY NON-SHADED AREAS OF PROJECT APPLICATION**

**PROJECT TITLE:** FY 2010 Comprehensive DUI Enforcement Program  
(completed for your convenience).

**GOVERNMENTAL UNIT:** Enter the name and complete address including zip code of the political jurisdiction responsible for the overall administration of the project (state agency or municipality).

**APPLICANT:** Enter the name and complete address including zip code of the organizational unit responsible for the overall administration of the project (state agency or municipality).

FEDERAL ID NUMBER: Enter the nine digit number assigned by the U. S. Department of Treasury, Internal Revenue Service for tax reporting purpose.

ANTICIPATED START  
UP DATE: First scheduled day of enforcement.

AUTHORIZING NAMES  
AND SIGNATURES: PROJECT DIRECTOR: Full name, title, address, etc. of person responsible for overall administration of the project.

FINANCIAL OFFICER: Full name, title, address, etc. of person responsible for overall fiscal administration of the project.

AUTHORIZING OFFICIAL OF UNIT: Full name, title, address, etc. of the chief executive officer of the political subdivision, (Mayor, Chief of Police, University Official, or State Agency Head).

\*\*\*\*\* NOTE \*\*\*\*\*

The Authorizing Official of the Governmental Unit, by his or her signature, assures that all Equal Employment Opportunity requirements will be met in carrying out this project.

\*\*\*\*\* NOTE\*\*\*\*\*

Submit application form with **original** signatures. **Photocopies or faxed forms will not be accepted.**

STATEMENT OF  
PROBLEM: Include your local DUI crash data and citation statistics and your local problem ID. Data must include alcohol-related fatal and injury crash data, DUI arrest data, time of the day, day of the week and the locations where your problem exists.

**OBJECTIVES:** Narrative should state what you expect to achieve and what difference the program make (i.e. reduce the number of DUI related crashes. Objectives should be clearly stated and measurable.

**ACTIVITIES AND PROCEDURES:** Please complete the blanks under "Enforcement Period" and note the following: The dates and hours of operation were selected after careful review of National Highway Safety Traffic Administration data and detailed discussion with experienced members of Connecticut's police community. Should you have a significant need to change any of these dates and/or hours of operation to fit your particular circumstances, prior approval from the Connecticut Department of Transportation's Transportation Safety Section is required.

You are strongly encouraged to publicize this enforcement effort in your local area at least once during holiday DUI mobilizations period. It is suggested that you contact adjacent police agencies to coordinate enforcement and to conduct a regional media campaign.

### **SOBRIETY CHECKPOINTS MUST BE PUBLICIZED**

Please indicate the Primary Enforcement locations within your municipality that your enforcement efforts may concentrate on. These areas are for informational purposes only.

### **PROJECT COST WORK SHEET(S)**

Please complete these work sheets prior to completing the BUDGET DETAIL Section of this project application. This section is used for budget estimates and manpower needs for the enforcement effort. The referenced work sheets include:

- Mobilization dates
- Expanded DUI dates
- Sobriety checkpoint worksheet(s)
- Special event worksheet(s)

### **BUDGET DETAIL**

- LINE 1: Total and transfer your estimated manpower costs for the total effort. (Sum of all worksheets)
- LINE 2: Enter the approved Overtime Fringe Benefit Rate (if applicable) and multiply this rate by the Total Estimated Wages.
- LINE 3: Enter the Total Anticipated Enforcement Costs by adding the Total Estimated Wages and the Fringe Benefit Costs.
- LINE 4: Enter the "Rounded Up" amount from Line 3 as directed.

### **FRINGE BENEFIT CERTIFICATION STATEMENT**

If applicable, have the Chief Financial Officer complete and sign this sheet with the latest approved Fringe Benefit Rate applied to Overtime Wages for the police agency during this enforcement period.

### **PROJECT EXPENDITURES --- REIMBURSEMENT REQUIREMENTS**

Note the **Project Starting Dates**, Ending Dates, and deadline for filing for reimbursement of eligible expenditures.

### **BUDGET SUMMARY**

PERSONNEL SERVICES & TOTAL BUDGETED: Please transfer the rounded up Amount from LINE 4, BUDGET DETAIL (A) PERSONAL SERVICES.

REPORTING NEEDS TO BE SUBMITTED BY FEBRUARY 1<sup>st</sup>, AUGUST 1<sup>st</sup>, and OCTOBER 12<sup>th</sup>.

### **\*\*\*SPECIAL NOTE FOR NATIONAL MOBILIZATION CAMPAIGNS \*\*\***

As part of the National DUI Campaigns', please plan to participate in the National Mobilization/Crackdown DUI Campaigns by conducting checkpoints and saturation patrols during the Campaign's designated enforcement period.

#### Source of Funds

FEDERAL FUNDS: 75% of TOTAL BUDGET

NON-FEDERAL FUNDS: 25% of TOTAL BUDGET.

# REGULATIONS GOVERNING HIGHWAY SAFETY PROJECTS

## PURPOSE

To provide potential Highway Safety Funding recipients with a comprehensive listing of regulations governing the administration of an approved highway safety project.

## GENERAL REGULATIONS

1. The grant shall be administered by a governmental agency, either local or state, having authority and responsibility to conduct the project.
2. Grant expenditures must meet the following criteria:
  - A. **Supplement** rather than replace existing activities.
  - B. Be necessary and reasonable, and supported in the budget narrative.
  - C. Be eligible expenses under federal, state and local laws/regulations.
  - D. Conform to the federal common rule.
  - E. Must follow all generally accepted accounting principles.
  - F. Not be included as a cost of any other federally financed program.
  - G. Be net of all applicable credits.
  - H. Incur within an approved grant period.
  - I. Be adequately supported by source documentation.
  - J. Not result in a profit to the grantee.
3. All state agencies must have state budget authority to accept highway safety funds.

4. Only expenses contained within an approved grant budget may be claimed. Any deviations from the approved budget must have **prior** Transportation Safety Section (TSS) approval to be eligible for reimbursement. Back-up documentation (i.e. fully executed time distribution report) and proof of payment (i.e. cancelled checks) must accompany request for reimbursement.
5. All source documentation for incurred costs must be maintained for review purposes for a three-year period following the final reimbursement of the project.
6. All travel costs outside the state, extensive in-state trips, and conference registrations shall have **prior** written approval of the Transportation Safety Program Coordinator.
7. All agencies shall use purchasing practices and bid procedures that provide maximum open and free competition. In addition, positive efforts should be in effect to utilize small business and minority-owned business sources of supplies and services. The Minority Business Enterprise requirements of 49 C.F.R. Part 23 applies to this project.
8. The APPLICANT shall comply with the regulations of the United States Department of Transportation (Title 49, Code of Federal Regulations, Part 21), issued in implementation of Title VI of the Civil Rights Act of 1964, 78 Statute. 252, 42 United States Code 2000d to 2000d-4. Further, the APPLICANT agrees and warrants that in the performance of this project, it will not discriminate or permit discrimination against any person or group of persons on the grounds of race, color, religion, national origin, sex, sexual orientation, or physical disability, including but not limited to blindness, unless it is shown to be that such disability prevents performance of the work involved, in any manner prohibited by the laws of the United States, or the State of Connecticut, and further agrees to provide the Commission on Human Rights and Opportunities with such information requested by the Commission concerning the employment practices and procedures of the APPLICANT as related to the provisions of this section. (Section 4-114a and 4a-60a of the Connecticut General Statutes, as revised.)
09. Purchases must be in accordance with normal state and/or agency and/or town procedures. Purchases must also be in accordance with the requirements set forth in the Procurement Standards (based on "OMB Circular A-102, Attachment O"), available upon request. Conformance with the "Buy America Act" (23 U.S.C. 101 Note and 41 U.S.C. 10a) is required.
10. It is a requirement that all applicants comply with the "Drug Free Workplace Act of 1988" (49 C.F.R. Part 29 Subpart F).

11. The Transportation Safety Section MUST be notified (in writing) within thirty (30) days of the receipt of any equipment. Information provided shall consist of name, model, serial number, cost, date of delivery taken, and a brief description of each article purchased. After the expiration date of this project, all non-expendable equipment purchased under this project will continue to be used in a Highway Safety-related effort. The APPLICANT shall notify the Transportation Safety Section immediately if any equipment purchased under this project ceases to be used in the manner set forth in this project application. In such event, the APPLICANT agrees to refund the residual value of such equipment in an amount to be determined by the Transportation Safety Section, or to transfer or otherwise dispose of such equipment as directed by the Transportation Safety Section. NO EQUIPMENT WILL BE CONVEYED, SOLD, SALVAGED, TRANSFERRED, OR OTHERWISE BE USED OTHER THAN EXPRESSLY DETAILED IN THIS APPLICATION WITHOUT THE EXPRESS WRITTEN APPROVAL OF THE TRANSPORTATION SAFETY SECTION.
12. The APPLICANT shall maintain or cause to be maintained for its useful life, any equipment purchased under this project. Standard procedures governing the ownership, use, and disposition of equipment acquired under this project are covered in the Property Management Standards (based on "OMB Circular A-102, Attachment N").
13. Any contracts entered into as part of this project's performance must receive written approval PRIOR to contract award.
14. Should the APPLICANT agency be audited, and the responsible unit, department, etc. of the grant be included as part of such audit, a copy of that applicable section [of said audit] must be forwarded to the Transportation Safety Section.